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AN EXAMINATION OF CHILD ABUSE AND NEGLECT SERVICES IN HAWAII

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STATE OF HAWAII

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LEGISLATIVE REFERENCE BUREAU

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STATE OF HAWAII
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FOREWORD

The following recommendations were prepared in response to House Resolution No. 147, H.D. 1, Requesting an Examination of the Lack of Coordination in Child Abuse and Neglect Services, which was adopted during the Regular Session of 1986.

Services for the prevention and/or treatment of child abuse and neglect are provided by approximately twenty-nine private social service agencies, the family court, and at least twenty-three different branches, offices, and units within four state departments.

There is general agreement among these groups with the statement in the Resolution that "the necessary coordination to establish a comprehensive continuum of services...is currently insufficient and impaired by jurisdictional conflicts." There is a division of opinion, though, over what caused the insufficiency of coordination and how these jurisdictional conflicts might be resolved. The issue of coordination has been the subject of previous House resolutions and of several inter-agency task forces. These efforts, while well-intentioned, failed to gain the commitment of key decision-makers in the executive and legislative branches.

The Legislative Reference Bureau recommendations are divided into four sections, that is, organizational structure, program administration, service delivery, and budget-making. Each section includes a statement of the problems identified through interviews and correspondence with state personnel and with private providers and consumers of child abuse and neglect services. Each section includes specific recommendations pertaining to that aspect of the system and designates the agency or agencies which should undertake the prescribed actions. No follow-up was directed by the Resolution, yet fundamental to the success of any reform is monitoring and evaluation. The Bureau strongly recommends that the task force convened by the director of health to consider these recommendations and report to the

legislature also monitor and evaluate the progress made toward a "true system of integrated services."

The Legislative Reference Bureau acknowledges with sincere appreciation the cooperation and contributions of these individuals: Lynda Asato, Evangeline Barney, Gail Breakey, Dorothy Bremner, Susan Chandler, Moira Chin, Corinne Christensen, Margaret Egbert, Kenneth Enright, Gibby Fukutomi, Isabel Hacskeylo, Dee Helber, Millicent Honda, Henry Ichiho, Stanley Inkyo, Mae Kuramoto, Beverly Lee, Kenneth Ling, Joanne Little, Patti Lyons, Georgia McCauley, Denis Mee-Lee, Walter Nunokawa, Genevieve Okinaga, Betty Ona, Peter Sybinsky, Betsy Uohara, Ronaele Whittington, Timmi Wong, Ed Yoshimoto, and Nancy Yuen.

The Bureau also thanks the many individuals who wish to remain anonymous but who contributed valuable insights into the child abuse and neglect delivery system from the perspective of the consumers of those services.

INTRODUCTION

Like the elephant of the parable, the delivery of child abuse and neglect services in Hawaii is a large phenomenon. There are many perspectives from which it can be viewed and many ways in which it can be generalized. Currently, this is reflected by the number and variety of child abuse and neglect programs in the State and in the decentralized, pluralistic system of their administration.

The mutual dependency of these programs, agencies, and departments is both a blessing and a bane. Interdependency reduces the likelihood that a single organization, no matter how motivated and purposeful, will be able to act independently. In some circumstances, this can reduce an organization's flexibility and capacity to innovate. On the other hand, interdependency

permits concerted and coordinated action and the checks and balances that are necessary to maintain representativeness and accountability.

In most instances, interdependence is managed effectively by coordinating the efforts of all participants in the process. The difficulty, as pointed out in House Resolution No. 147, H.D. 1, is that "the necessary coordination of services [among state-administered programs] is currently insufficient and impaired by jurisdictional conflicts." This has occurred, in large part, because the missions and structures of the linked organizations are quite different, because there is no central authority which has jurisdiction over the linked organizations and can negotiate differences, and because the linked organizations are responsible to different constituencies. The symptoms, to which the resolution is a response, include competition over budget allocations, uncertain authority relations among agencies, cross-cutting purposes, conflicts over information-sharing, and jurisdictional disputes.

Better coordination is not something that has a life of its own: it is something that people do if the process is perceived to be equitable. For example, if organizations have little in common, they are not likely to initiate communications with each other. (From an organization's point of view, to become involved in an interdependent relationship implies that the organization loses some of its freedom to act unilaterally and that it must invest scarce resources and energy to develop and maintain a relationship with another organization when the potential returns on this investment are often unclear or intangible.) If organizations have too much in common, the potential for territorial disputes and competition increases. None of these barriers to coordination is easily overcome through reorganization alone. Indeed, it is far more important to motivate the personnel and leadership of the departments to implement a coordinated, continuous-care delivery system.

The recommendations which follow are organized into four areas: organizational structure, program administration, service delivery, and budget-making. A discussion of the types of problems encountered in each

area is accompanied by a list of recommended actions to improve the coordination of child abuse and neglect programs in the State.

ORGANIZATIONAL STRUCTURE

Every abused or neglected child is the result of a multi-dimensional problem, inextricably interrelated with other concerns and issues. Much of the existing organization of services, therefore, has developed along functional lines, and these functional areas cut across program and departmental lines. This creates three types of problems: dispersal of similar functions (fragmentation), discontinuity of related functions (gaps), and incoherence when different functions are pursued with little apparent attention given to their collective impact or to the ways in which they can work together (overlaps).

Fragmentation is the result of enacting child abuse and neglect programs piecemeal over the years without regard to their relationship to each other. To be sure, the scattering of related activities through numerous executive departments and agencies is not necessarily a sign of waste and inefficiency. In fact, a decentralized, pluralistic system displays a certain flexibility, creativity, and dynamism where client needs are widely varied and often multiple in nature. However, neither broad policies nor planned administrative mechanisms organize this array of public and private programs into a unified system of service. Rather, each agency generally tends to plan programs and act independently of the others, with each addressing a specific need or problem. This problem-oriented perspective discourages seeing and treating the child as a whole person. Nor does it foster program designs that account for the unique and varied needs of individual children.

Most of the gaps in related functions among state agencies are as a result of a lack of systematic planning. Oversight reviews are not consistently conducted to identify gaps in services among the various state agencies, nor are reviews made to find places where resources might be

combined to address unmet needs. The problem is compounded when overburdened case workers, for example, are forced to focus almost exclusively on crisis cases and do not have time to evaluate the effectiveness of their services or to contact other service providers with the information that their client is receiving a second service. It is not clear how the original service provider can know if a client successfully receives all the services needed. In fact, the more complex the set of needs to be met and the greater the number of service workers involved, the more difficult such follow-up becomes. The likelihood of a client's receiving all the services needed in such situations is small.

Other gaps are simply the result of a breakdown in communication between interested parties. For example, in a letter dated June 18, 1986, the superintendent of education indicated that "the Department of Education does not have any formal working agreements with other state agencies or departments with regard to child abuse and neglect services." In fact, a working agreement does exist between the department of education and the department of health, mental health division, pursuant to section 321-174, Hawaii Revised Statutes, regarding the coordination of the children's mental health services team and the schools.¹ These teams provide "diagnostic, consultative, rehabilitative and treatment services for school-aged children and youth" after department of education personnel have "assessed the need for MHD [Mental Health Division] consultation, evaluation and intervention."²

One of the most striking examples of overlap in the organizational structure of child abuse and neglect services is the relationship between the department of health and the department of social services and housing. In this relationship, two functionally-segregated delivery systems both focus on providing services for children and families. The parameters of their responsibilities have not been clearly defined, and accountability for individual clients, who may be simultaneously involved with both departments, is diminished since the current system does not provide a mechanism for integration of services for clients with multiple needs. Under the

circumstances, it is possible that some children and some families never receive the services they need.

Recommendations

It is recommended that:

1. The governor or the legislature mandate the development of linkages between the state-administered programs on child abuse and neglect by the task force convened by the director of health, and provide stronger leadership in improving policies to assure quality, accessibility, and equity.

2. The legislature compel the departments of education, health, and social services and housing, and the family court to participate in joint planning, joint budgeting, joint evaluation, joint programming, and joint development of operating policies in the area of child abuse and neglect, the guidelines for which should be developed by the task force convened by the director of health.

3. A common set of data to assess needs, profile populations, and track the use of services be developed by the Office of Children and Youth, made available to the departments of education, health, and social services and housing, and the family court, and used in the joint planning process for child abuse and neglect services.

4. The departments of education, health, and social services and housing meet and agree on the information necessary for coordinated management of child abuse and neglect cases, and that this information be furnished to any state agency or department providing direct services to an abused or neglected child or to the family of such a child notwithstanding any provision for confidentiality.

5. Standardized procedures for tracking clients through multiple contacts with service personnel and a formal case management system for multiproblem clients be developed jointly by the departments of education, health, and social services and housing, and the family court.

6. The departments of health and social services and housing negotiate a memorandum of agreement clarifying the responsibilities of each in the areas of prevention and intervention, and with regard to "threatened harm" as defined in the Child Protective Act.

7. Departments with formal working agreements insure that the contents of those agreements and any regulations or guidelines developed pursuant to those working agreements are disseminated to all affected parties.

8. Commitment on the part of service providers to implement coordinated, continuous client care be fostered through the regular dissemination of information regarding inter- and intra-departmental activities, policies, and procedures.

PROGRAM ADMINISTRATION

Many policy decisions have unintended, negative impacts on program administration. For example, the department of health is required by statute to "...serve as the coordinating agency for programs which provide for a range of child abuse and neglect prevention services in relation to assessed needs, regardless of whether the programs are conducted by the department, other government agencies, or private organizations and to coordinate the prevention programs with child abuse and neglect treatment services;..."³ The legislative mandate, however, took no notice of the fact that the agencies do not use common definitions to categorize services. One unintended result, then, was the addition of more coordinating mechanisms and procedures which made the stated intent of the legislature to "...strengthen the State's efforts to provide comprehensive child abuse and neglect prevention services..."⁴

and to "...minimize duplication and promote efficiency and effectiveness..."⁵ even more difficult to achieve. The statute also required that a child abuse and neglect secondary prevention advisory committee be established to advise the department of health on the implementation of child abuse and neglect secondary prevention programs. Leaving aside the unresolved debate among the departments as to what constitutes secondary prevention, the committee's purpose seems ill-conceived. In particular, questions have arisen as to the propriety of its members ("officers or employees of public and private agencies which provide multidisciplinary intervention services for the secondary prevention of child abuse and neglect")⁶ advising the department of health on the need for services which they themselves offer as private providers.

At the same time, program administrators keep scrupulously, even over-scrupulously, within the limits set by statute and do not avail themselves as fully as they could of the marginal possibilities for action and influence open to them. That is, while adhering to the letter of the law, many administrators are unable to meet the spirit of the law due to a lack of funding and staff resources. A 1975 Legislative Reference Bureau assessment of Hawaii's Commission on Children and Youth (the predecessor of the present Office of Children and Youth) found such a situation and reported that an "[a]pparent lack of resources, staff, and support has severely hampered the operations of the [Commission]."⁷ A similar situation exists today.

The director of the Office of Children and Youth, for example, is empowered by statute to "serve as the principal official in state government responsible for promoting the coordination of programs and services in behalf of children and youth."⁸ The Office itself is required to "[c]onduct selected monitoring and promote the coordination of the operations and the operating policies affecting children and youth of all state departments and agencies responsible for providing services for children and youth, including, without limitation to the generality of the foregoing, the department of health, the department of social services and housing, the department of education, and the department of labor and industrial relations,..."⁹ Yet, due to a lack of

funds and staff, the present director has interpreted the statute to mean that "...OCY's coordination responsibility extends to all these services on a selective basis..."¹⁰ only. The director also feels that the "...success of coordinating activities is dependent...on the clout and effectiveness of the lead coordinating office...."¹¹ In this respect, the director feels that "...OCY's future clout has been diminished by the recent Executive Salary legislation..." and that "...this downgrading will make it more difficult for the incoming director to deal with department directors and their deputies on a collegial level...."¹²

Program resources are not being administered in such a way as to respond to the complexity of needs of an individual client, the range of simple or complex needs of clients in the aggregate, or the uncertainty of when and where a particular combination of needs will arise. In an attachment to a letter dated June 13, 1986, the director of the Office of Children and Youth discusses coordination problems of "...at-risk children who are not specifically identified as clients for child abuse and neglect prevention and treatment services...." Among the examples cited is the situation surrounding the department of health's psychiatric hospitalization program for children aged four to twelve. The department's program is designed to care for children five days a week; it is not considered by the department as a full hospital service. As a consequence, some children have been placed in the department of social services and housing foster homes on weekends and their cases managed by social workers who are not trained to provide care to seriously mentally disturbed children. Other children, who need full hospital service, the director of the Office of Children and Youth says, "...do not enter the program at all, remain at home, and attend DOE [department of education] classes where they are highly disruptive and even dangerous to other students and school staff...." This lack of flexibility reflects a program administration overwhelmed by its workload and without the time to deal with underlying systemic problems. This is partly because current monitoring activities carried out by the departments have not produced a uniform system to determine the effectiveness of services, to track the utilization of services, or to identify the needs for services

accurately and partly because the volume of demand for services and the turnover among staff is so great.

Recommendations

It is recommended that:

1. The department of health request clarification from the State Ethics Commission regarding the application of Opinion No. 565 (see Appendix B) to the members of the child abuse and neglect secondary prevention advisory committee, and that the department's attorneys assist in developing guidelines for the members in conformance with section 84-14(a), Hawaii Revised Statutes.

2. The responsibility for promoting the coordination of child abuse and neglect programs be delegated to the superintendent of education and the directors of health and social services and housing, in addition to the Office of Children and Youth.

3. A uniform system to determine the effectiveness of services, to track the utilization of services, and to identify the needs for services be developed jointly by the departments of education, health, and social services and housing, and the family court, and that this information be available to program administrators planning the purchases of service under chapter 42, Hawaii Revised Statutes.

SERVICE DELIVERY

The intervention strategies and treatment programs currently available in the area of child abuse and neglect include services to the abuser or neglecter in an effort to address the causes of the behavior and prevent its recurrence, as well as services to protect the abused or neglected child, to

remedy or reduce the impact of the abuse or neglect on the child, and to prevent long-term negative effects of the abuse or neglect on the child's development and growth.

Entry into the child abuse and neglect service delivery system can be voluntary; that is, "[a] child or the child's parent, guardian, or legal custodian may voluntarily apply to an intake agency to obtain appropriate services, including family conciliation and counseling, regarding issues or problems involving the child which are not being successfully resolved within the family."¹³ Entry can be the result of an action by the family courts; that is, "...the court may formulate a plan adapted to the requirements of the child and his family and the necessary protection of the community, and may utilize all state and community resources to the extent possible in its implementation."¹⁴ Entry can also be by informal referral; that is, as a result of screening done in the hospital or by the family pediatrician or by a public health nurse using a standardized screening instrument to identify at-risk infants.

One coordination issue to be addressed in the child abuse and neglect delivery system is how administrative arrangements affect the quality of client services. To consider this issue, it is necessary to look at the actual day-to-day operations of the system rather than normative statements regarding what is "supposed" to happen according to the formal structure of rules and directives. Although the information about actual day-to-day operations presented here is anecdotal, rather than statistical, it provides a more concrete view of case processing than what would be gained from a general discussion about service delivery variables. (One of the recommendations addresses the need for statistical information.)

For example, there are serious questions as to whether reports that a minor is believed to have been harmed or threatened with harm are being made in a timely manner to the department of social services and housing or to the police department. Apparently, some educational officials are reluctant to report suspected abuse or neglect until they have investigated the incident

for themselves. This independent investigation is clearly not what was intended by the statute:¹⁵ the department of social services and housing conducts the investigation and determines whether the matter can be resolved informally, or by entering into a service plan with members of the child's family, or by assuming temporary foster custody of the child, or by filing a petition in the family court invoking the jurisdiction of the court in the case. This discretionary application of their reporting responsibility on the part of some officials has led to apocryphal stories of abused and neglected children not brought to the attention of the department of social services and housing for periods ranging between four months and two years.

There are also serious questions about which reports are being processed by child protective services case workers. According to Stan Inkyo, assistant administrator for the child protective services program, because of present severe staffing shortages, "...there is a tendency to screen out, not take situations that normally come into the picture...."¹⁶ For many legal and private social work professionals, this constitutes a potentially litigious use of discretion on the part of some case workers.¹⁷ Yet, the shortages are evidence of a vicious cycle: shortages mean the caseload per worker is unconscionably high; large caseloads have a negative impact on the department's ability to recruit and retain trained workers; the department's inability to recruit and retain trained workers leads to staffing shortages; and shortages lead back to high workloads and questions regarding uses of discretion.

One aspect of the problem is finding trained case workers. The department of social services and housing depends to a large extent on the University of Hawaii School of Social Work for entry-level case workers, yet the department's expectations are unrealistic. The training social workers receive at the university is intended to prepare them for careers in any of the various applications of social work (i.e., work with the elderly, with the disabled, with sex offenders, etc.) and not specifically for work as child protective services case workers. The department, therefore, does provide some in-service training for its case workers, utilizing a handbook recently

compiled which appears to be fairly complete. Case workers with very little training and experience, though, not only are deciding which cases require state intervention, but also are making life-altering decisions about the treatment of families with whom they choose to work and providing so-called expert testimony to the court in custody cases.¹⁸

Use of the abuse and neglect reports for law enforcement as well as diagnostic and treatment purposes also creates coordination issues. Approaching child abuse as a legal problem with potential or avowed adverse interests or proceedings is not viewed by some in the medical and social welfare community as conducive to either successful or positive intervention. The family court, for instance, depends in part on child protective services case workers and public health nurses for information regarding the then-current situation of the child. These case workers and nurses are the same individuals who have been working to maintain and strengthen the family unit so that the child may be retained in the child's own home. That these workers are now called on to testify in an adversarial setting has implications that affect not only subsequent legal proceedings, but also the self-image of individual members of the family. It deprives the family of a trusted, confidential resource and stigmatizes the family, diminishing their belief in the system and isolating them from the very resources they need. This loss can be reckoned in terms of public policy on child abuse as well: it may diminish self-reporting or the seeking of help.

Child abuse and neglect service needs have a tendency to change in both character and scope more quickly than the programs created to deal with them. For example, the general lack of diverse and appropriate services for adolescents tends to force workers to rely on what is available, rather than what is needed. Often, this has resulted in short-term placement facilities being overloaded with long-term referrals, and, sometimes, in a reliance upon family court to handle adolescents whose behavior cannot be remediated by available social services. The difficulties with criminal prosecution in these cases lie not in the substantive law base; they lie in the lack of public or private services targeted for adolescents. Indeed, the removal of adolescents

(and other children) from the home (frequently for long periods and without provision for family treatment) is cited by some social workers as the most potentially harmful and punitive aspect of the existing system. It is clear from the statements of these social workers that they view assisting family functioning and stability as more important than isolated efforts directed at distinct symptomatic behaviors (e.g., delinquency, status offenses, substance abuse, sex abuse, and child abuse and neglect). These workers believe that here the need for coordination means making the family the foremost concern of the Child Protective Act.

Recommendations

It is recommended that:

1. The Office of Children and Youth compile empirical data regarding child abuse and neglect case processing to support or refute claims about reporting violations by departmental personnel and that the Office of Children and Youth transmit its findings to the appropriate department so that any individual misinterpreting the meaning or intention of the individual's responsibilities in the area of reporting or processing reports can be counseled. Under the law, if it is found that a person knowingly failed to report an incident which the person had reason to believe involved child abuse or neglect or wilfully prevented another person from reporting such an incident, the proceedings must be turned over to the prosecutor.

2. The department of social services and housing and the University of Hawaii School of Social Work meet and agree on the details of an expanded child protective services practicum to be offered graduate students in social work, and that the department of social services and housing, the University of Hawaii School of Social Work, and the University of Hawaii College of Continuing Education meet and agree on the details of a course or series of courses for case workers needing skills development in intake, crisis intervention, investigation, case management, or courtroom procedures.

3. The child protective services case workers and public health nurses called on to testify in child abuse and neglect cases be familiarized with courtroom procedures and demeanor by the family court, in conjunction with the University of Hawaii School of Social Work and the University of Hawaii College of Continuing Education (see above, recommendation no. 2.)

4. The family court develop rules of evidence raising the burden of proof in Child Protective Act proceedings to require the prosecutor to show that testimony by public health nurses and child protective services case workers are in the best interests of the child, bearing in mind that these nurses and case workers have gained the trust of the family, will violate that confidence in court, and may have to attempt to regain it depending on the decision of the court.

5. The departments of health and social services and housing include more specialized treatment programs for adolescents in their fiscal year 1987-1988 requests for proposals from the private sector.

6. Standardized screening instruments and procedures for identifying infants at-risk for child abuse and neglect be required in public and private hospitals and by private physicians using hospital facilities throughout the State.

7. Social workers in child protective services inform the families with which they work at the inception of contact of the legal basis for recognition of neglect or abuse by the family court and the worker's potential role as a provider of informed testimony about the family in court.

8. Pre-service training for case workers in the area of child abuse and neglect reflect the institutional and clinical realities of the current situation, and that in-service training for case workers focus on the improvement of intermediate and advanced skills.

9. The recruitment and retention of case workers be improved through the use of exit interviews and other information-gathering techniques for determining why trained workers leave the field.

BUDGET-MAKING

Approximately twenty-nine private social service agencies, the family court, and at least twenty-three different branches, offices, and units within four state departments provide direct services for the prevention and/or treatment of child abuse and neglect in the State, according to the Inventory of Child Abuse/Neglect Services in Hawaii published by the Office of Children and Youth. Yet, services for abused and neglected children are not an identifiable piece of the state budget. For example, the departments involved do not routinely determine direct expenditure amounts attributable to child abuse and neglect cases.¹⁹ When purchase of service amounts are represented in the overall agency or division's budget, targeted recipients of these funds are not.²⁰ And, in the family court, moneys for abused or neglected children are not considered distinct from the budget allocation for all children in need of state protection.²¹ Funds for services to abused and neglected children and their families that do not flow through a state department constitute a separate category of funding for which accurate annual revenue figures also are not readily available.

Change is a natural condition of the child abuse and neglect service delivery system, yet the lack of a comprehensive budget composite with delineated program components for child abuse and neglect brings the State to a standstill in terms of its ability to develop new services, expand existing services, or achieve innovation and improvements by maximizing or redirecting funding resources. Without a clear idea of how much is being spent by whom for the prevention and treatment of child abuse and neglect, it is not possible to measure the cost effectiveness of current spending levels or to determine the relative cost effectiveness of various approaches to prevention and treatment or to make informed decisions about how to spend future moneys.

This inability on the part of the State to identify its funding commitment to child abuse and neglect services is neither cost-effective in an era of shrinking and finite resources, nor conducive to coordinated service delivery. (See discussion on page 8 regarding the lack of funds and staff affecting operations.)

Chapter 42, Hawaii Revised Statutes, establishes standards for providers and recipients of grants, subsidies, and purchases of service, the conditions with which applicants must comply, the procedures for the review and funding of requests, and the monitoring and evaluation of transfers for grants, subsidies, and purchases of service. Section 42-5(c), Hawaii Revised Statutes, allows a request not reviewed by the director of finance to be submitted in writing to the appropriate standing committee of the legislature which, in turn, is required to refer such a request to the appropriate agency for review. The agency then has fifteen days in which to submit a statement of its findings and recommendations regarding the request to the legislative committee. In the words of the measure's introducer, "If there is any proposal before this session of the Legislature [1981] that I think will help taxpayers save some money, it is this bill. What it does is to screen out very carefully all the private grant requests that come to the legislature annually. It sets certain standards by which these requesting organizations will qualify for grants from the state and makes it mandatory for some of these requesting agencies to justify their claims, their requests....This does, indeed, help to clean up the myriad of requests coming to our legislative sessions."²²

What it also does is remove a measure of the departments' control over the submission of requests for purchases of service, and this has an impact on both departmental priorities and departmental planning. Providers who have their own power and influence with funding sources are a complication in the chapter 42, Hawaii Revised Statutes, process which is not going to go away. Neither is it likely or desirable that the legislature abrogate its power and responsibility to set state policy and fund those programs which it believes to be in the best interests of public health and safety. The most

powerful incentive for coordination in this instance is the availability of additional money for service providers who participate in joint planning with state agencies and among themselves.

Recommendations

It is recommended that:

1. The departments of the attorney general, education, health, and social services and housing, and the Office of Children and Youth determine the direct expenditure amounts in their budgets attributable to child abuse and neglect services.

2. Purchase of service amounts represented in the departments' budgets specify the targeted recipients of these funds.

3. The family court determine the chapter 42, Hawaii Revised Statutes, purchase of service amounts in their budget attributable to the treatment or placement of abused or neglected children.

4. The legislature review the spending for child abuse and neglect services by all state agencies, either directly or through purchase of service, and consider offering financial incentives for the provision of services in gap areas and for participation in joint planning.

5. The task force convened by the director of health determine whether implementing the recommendations contained herein will require additional funds from the legislature and estimate the amount of funds necessary for their implementation.

CONCLUSION

No change in organizational structure or program administration or service delivery or budget-making will be effective; no amount of money will be enough; no increase in the numbers of case workers or public health nurses or teachers or judges or administrators will make a difference unless each person whose responsibility it is to protect children from abuse and neglect decides that the children are more important than the system.

"Coordination" and "integration" and "communication" are not issues between people who are motivated by the same goals. The motivation comes first and it comes from a profound personal belief that it is totally unacceptable for children in our society to suffer abuse and neglect. The present difficulties of the child abuse and neglect service delivery system are only partly a lack of institutional, legal, financial, or analytical capability to solve the coordination problem. What is really lacking is a fundamental sense of urgency among government personnel about getting help to abused and neglected children. In contrast, the search for mechanisms that will improve "coordination" is of small importance. To be meaningful, every change in the child abuse and neglect prevention and treatment system must meet with complementary changes in each individual who has a part in protecting children from abuse and neglect.

When governments are fully motivated to cure a social problem, the ways and means are usually found to do so. Children who are victims of abuse and neglect cannot vote, cannot lobby, cannot be advocates for the changes needed in our protection of them. In short, they have neither voice nor vehicle to bring their plight to our attention. It is the responsibility of each individual--no matter how overworked, underpaid, or fed up with the current system--to aggressively advocate for a child's right to live without fear of abuse and neglect. Anything less is an unforgivable breach of our social contract, with irreparable results.

FOOTNOTES

1. "Working Agreement Between Department of Education and Department of Health, Mental Health Division" effective March 1, 1985, signed by Francis M. Hatanaka as Superintendent of Education and Leslie S. Matsubara as Director of Health.
2. Ibid., p. 2.
3. Hawaii Rev. Stat., sec. 321-31.
4. House Standing Committee Report No. 221 on House Bill No. 2257, Twelfth Legislature, 1984, State of Hawaii.
5. Conference Committee Report No. 64 on House Bill No. 2257, Twelfth Legislature, 1984, State of Hawaii.
6. Hawaii Rev. Stat., sec. 321-38(a).
7. Charles H. Nishimura and others, Hawaii's Commission on Children and Youth; An Assessment of its Organization, Management, and Operation, Legislative Reference Bureau, (Honolulu: 1975), p. 43.
8. Hawaii Rev. Stat., sec. 581-2.
9. Hawaii Rev. Stat., sec. 581-3.
10. Letter from Genevieve T. Okinaga as Director of the Office of Children and Youth to Christina Uebelein, June 13, 1986, p. 2.
11. Ibid.
12. Ibid.
13. Hawaii Rev. Stat., sec. 571-31.3.
14. Hawaii Rev. Stat., sec. 571-1.
15. Hawaii Rev. Stat., sec. 350-1.1(a).
16. Honolulu Star-Bulletin, July 31, 1986, p. A-13.
17. See Appendix C.
18. In a telephone conversation with Stanley Inkyo, Assistant Administrator for the Child Protective Services program, Department of Social Services and Housing, on August 4, 1986, Mr. Inkyo stated that beginning child protective services case workers are given a three-day general orientation to the department (the same as other new departmental employees) and a seven-day training workshop in intake procedures, case management, crisis intervention, and investigation techniques.

19. Letter from Jensen S. L. Hee, Director, Department of Budget and Finance, to Christina Uebelein, June 20, 1986.
20. Ibid., p. 2.
21. Letter from Kenneth K. M. Ling, Director, Family Court, First Circuit, to Christina Uebelein, June 27, 1986.
22. Hawaii, Journal of the Senate of the Eleventh Legislature, Regular Session of 1981, p. 406.

HOUSE OF REPRESENTATIVES
THIRTEENTH LEGISLATURE, 1986
STATE OF HAWAII

H. R. NO.

147
H.D. 1

HOUSE RESOLUTION

REQUESTING AN EXAMINATION OF THE LACK OF COORDINATION IN CHILD ABUSE AND NEGLECT SERVICES AND RELATED PERSON ABUSE PROGRAMS

WHEREAS, over 4,000 cases of suspected child abuse or neglect were being reported annually by 1984 to the Hawaii Child Protective Services Unit and approximately one-half of the reports were confirmed; and

WHEREAS, these numbers, however, do not truly represent the magnitude of the problem; and

WHEREAS, one national study has determined that only twenty-one percent of the actual incidences of child abuse and neglect are reported; and

WHEREAS, child abuse and neglect is a major causative factor of mental illness, mental retardation, learning disability, and substance abuse and has a high correlation with juvenile delinquency and criminal behavior; and

WHEREAS, most parents who engage in the abuse or neglect of their children were themselves the victims of abuse or neglect; and

WHEREAS, the magnitude, severity, and resultant social and individual costs of the problem urgently require the breaking of the abused to abuser cycle and identification and treatment of potential and actual perpetrators and victims; and

WHEREAS, addressing the child abuse and neglect problem effectively requires coordinated and comprehensive primary and secondary prevention as well as crisis intervention and treatment; and

WHEREAS, among the services required are: reporting and investigation of suspected child abuse and neglect cases; protective supervision and judicial intervention; criminal investigation and prosecution; assessment of high risk families;

individual, family, and group counseling; substance abuse treatment and residential treatment; parenting education; perinatal bonding; mental health counseling and psychotherapy; family life and sex education; respite and crisis child care; foster care; public health nursing; self-help groups; outreach counseling; and public information and education; and

WHEREAS, these services are within the operational authority of various public agencies, which include the Department of Social Services and Housing, Department of Health, Department of Education, the Family Court and the University of Hawaii; and

WHEREAS, the necessary coordination to establish a comprehensive continuum of services, however, is currently insufficient and impaired by jurisdictional conflicts; now, therefore,

BE IT RESOLVED by the House of Representatives of the Thirteenth Legislature of the State of Hawaii, Regular Session of 1986, that the Legislative Reference Bureau is requested to examine the lack of coordination among public agencies in child abuse and neglect primary and secondary prevention, crisis intervention, and treatment programs; and

BE IT FURTHER RESOLVED that the examination include recommendations for effecting better coordination of child abuse and neglect services among public agencies and private organizations and that said recommendations be submitted to the Director of the Department of Health by September 1, 1986; and

BE IT FURTHER RESOLVED that the Director of Health convene a task force among all public and private agencies involved in child abuse and neglect services and related person abuse programs to develop a true system of integrated services and that a report on the progress of recommendations made by the Legislative Reference Bureau be submitted twenty days prior to the convening of the Regular Session of 1987; and

BE IT FURTHER RESOLVED that certified copies of this Resolution be transmitted to the Legislative Reference Bureau, the Department of Health, Department of Social Services and Housing, Department of Education, Family Court of the First Circuit and the University of Hawaii.

Appendix B

OPINION NO. 865

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A member of a state council and a state service area board requested an advisory opinion on the application of the State Ethics Code to him because he served in a variety of capacities with private nonprofit organizations that had contracts with a state department and dealt with other agencies of the state government. The board member stated that the role of the council was to advise a department on the allocation of resources and on statewide needs and programs and to review and comment on the state plan. The board member stated that the role of the various service area boards was to advise the state centers serving specific geographical areas on public and industry perspectives. The Commission reviewed the board member's situation and noted that a number of sections of the ethica code might be relevant: HRS 884-14(a) and HRS 884-14(d), portions of the conflicts-of-interests section; HRS 884-15(a), the contracts section; and HRS 884-18 and HRS 884-15(b), the post-employment sections.

The Commission first considered the application of HRS 884-14(a), which states in part:

- No employee shall take any official action directly affecting:
 - (1) A business or other undertaking in which he has a substantial financial interest; or
 - (2) A private undertaking in which he is engaged as legal counsel, advisor, consultant, representative, or other agency capacity.

• • •

A person whose position on a board, commission, or committee is mandated by statute, resolution, or executive order to have particular qualifications shall only be prohibited from taking official action that directly and specifically affects a business or undertaking in which he has a substantial financial interest; provided that the substantial financial interest is related to the member's particular qualifications.

1 The Commission confirmed that this subsection requires employees (board
2 and commission members are included as employees under the ethics law) to
3 disqualify themselves from taking official action in matters that directly affect
4 their substantial financial interests. Additionally, the Commission stated that
5 "official action" means a decision, recommendation, approval, disapproval, or
6 other action, including inaction, which involves the use of discretionary
7 authority. The Commission also noted that for purposes of the ethics code,
8 the Commission had determined that an employment interest, an officership,
9 and membership on the board of directors of a private organization by an
10 employee, employee's spouse, or employee's dependent child are substantial
11 financial interests. Finally, the Commission noted that there is a limited
12 exception for mandated board and commission members, individuals who serve
13 because of their particular qualifications; mandated board members are
14 required to refrain from participating on matters only if the action of the
15 board may directly and specifically affect their substantial interests.

16

17 The Commission concluded that because the board member served as an
18 industry member of the council, the limited exception for mandated board
19 members applied. Accordingly, while the board member could participate in
20 matters of policy and give general advice to the department or to his area
21 center, he had to disqualify himself from taking discretionary action that
22 directly and specifically affected any of his substantial financial interests. In
23 the board member's opinion, the private organization that he worked for was
24 unlikely to be involved in his state responsibilities. It was possible, how-
25 ever, that the council and the area center might consider matters that would
26 affect another organization that he served as a board member. The Commis-
27 sion stated that if this should occur, the board member would be required to
28 refrain not only from voting and participating in a final decision by either the
29 council or the area board but also from participating in any discussions on
30 the matter. The Commission recognized that because the council was newly
31 formed, the line between general policy issues and specific matters was not
32 yet clear. The Commission believed, however, that once the work of the

1 council got underway, discussions by the council, with the department's staff
2 and perhaps this Commission's staff, on the differentiation between general
3 policy and specific matters would clarify the situation.

4

5 The board member had expressed some concern that his membership on
6 the council might jeopardize or limit the agencies he was associated with in
7 their relationships with the State. The Commission commented that the ethics
8 law does not prohibit contracts between the State and organizations that state
9 board members are associated with in their private capacities but that it does
10 set out guidelines to ensure fairness in the contract award process. First of
11 all, the Commission noted that if an employee has a controlling interest in a
12 business, HRS §84-15(a) requires a state agency to follow an open, public
13 process if the amount of the contract is more than \$1,000. The Commission
14 emphasized that with respect to board and commission members, this require-
15 ment applies only to the department to which the members' boards are
16 attached. For example, the Commission stated that in the board member's
17 case, the restriction would be limited to any contracts between any of his
18 controlling interests and the particular department to which his boards were
19 attached. In Advisory Opinion No. 267, the Commission had concluded that
20 serving as the executive director of a nonprofit organization is a controlling
21 interest because such an individual is charged with the overall operation of
22 the business. Consequently, the Commission advised that the department
23 would have to follow an open, public process before entering into a contract
24 for services with the private organization that employed the board member.

25

26 The Commission stated that a second restriction was set out in HRS
27 §84-14(d), which states:

28 No legislator or employee shall assist any person or
29 business or act in a representative capacity for a fee or other
30 compensation to secure passage of a bill or to obtain a con-
31 tract, claim, or other transaction or proposal in which he has
32 participated or will participate as a legislator or employee, nor
shall he assist any person or business or act in a representa-
tive capacity for a fee or other compensation on such bill,
contract, claim, or other transaction or proposal before the
legislature or agency of which he is an employee or legislator.

1 In the Commission's view, council and service area board members were
2 precluded by this section from accepting compensation for seeking or assisting
3 another individual or organization in seeking action from the department.
4 Thus, board members who were employed by organizations that had contrac-
5 tual agreements with the department to provide goods or services could not
6 assist or participate at all in these matters. In the board member's case, he
7 would be unable to seek action on behalf of his employing organization or to
8 assist it in any matter involving the department. However, because the
9 board member received no compensation as a board member of a different
10 organization or as a member of other organizations, the Commission determined
11 that HRS §84-14(d) would not restrict his interaction with the department on
12 behalf of those organizations.

13

14 The board member had indicated that as the executive director of a
15 private organization, he had played and would be required to continue to play
16 an active role in securing purchase-of-service contracts with the department.
17 The board member stated that he thought he would have to resign from the
18 council and the area board if he believed after receiving the Commission's
19 opinion that the ethical restrictions would not permit him to carry out his
20 responsibilities with the private organization. The Commission told the board
21 member that if he should resign his state board positions, the post-
22 employment sections of the ethics law, HRS §84-18, which restricts a former
23 board member from seeking action from the department or subdivision with
24 which the board member served, and HRS §84-15(b), which prohibits a state
25 agency from entering into a contract with any person or business which is
26 represented or assisted personally in the matter by a person who had been an
27 employee of the agency within the preceding two years and who participated
28 while in state service on the matter with which the contract is directly
29 concerned, would apply to him. The board member represented that the work
30 of the private organization did not fall within the jurisdiction of the council
31 or the area board and that contracts had not been considered by either
32 board; accordingly, in the Commission's opinion, the board member would not
be curtailed by the post-employment restrictions.

1 Because of the widespread concern expressed by other members of the
2 council and service area boards, the Commission determined that copies of
3 this opinion should be transmitted to the department's director and to a
4 division chief for their information.

5

6 The Commission commended the board member for seeking its advice at
7 an early time and appreciated his expressed interest in promoting ethics in
8 state government.

9

10 Dated: Honolulu, Hawaii, October 9, 1985.

11

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13

STATE ETHICS COMMISSION

14

15

Allen K. Hoe, Chairperson

16

Tim Scott Farr, Vice Chairperson

17

Edith K. Kleinjans, Commissioner

18

Arnold J. Magid, Commissioner

19

20

21 Note: Commissioner Laurie A. Loomis was excused from the meeting at
22 which this opinion was considered.

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Appendix C

The cases cited are intended to illustrate the undesirable consequences of breakdowns and delays in the child abuse and neglect prevention and treatment delivery system. The details of each situation and the identities of both the families and the professionals involved were provided by an attorney familiar with the cases. All of the abused and neglected children described in the cases are presently receiving treatment or have attained the age of majority and are no longer the concern of the family court.

Case #1: In a family of five children, three were subjected to physical abuse and two were removed from the home upon the report of a police officer who saw the perpetrator strike the children. The department of social services and housing denied that there was child abuse, so the children were brought under the protection of the court by pleading guilty to made-up charges. For two years, the children were shuttled between detention home and numerous foster homes. At the end of two years, the children were returned home and ran away shortly thereafter. In addition to more physical abuse, they had been subjected to sexual abuse by the original perpetrator. The department of social services and housing did not initiate Child Protective Act petitions and fought attempts by the guardian ad litem and court officers to put the children under the Child Protective Act. All three remaining children, however, were removed from the home. The failure of the department of social services and housing to assume protection of the children led to their being returned to the perpetrator of their physical abuse and set up the situation for the perpetrator to sexually abuse them. The children have been damaged and all three need extensive therapy. There is no possibility of returning the children to their home.

Case #2: A teenage female who would be eighteen years old in four months from the date of the child protective services report was reported to have been sexually abused by four different family members and three persons outside the family. The child worked with the police and agreed to testify against the perpetrators. With the child's assistance, the police uncovered seven perpetrators (three of whom were psychologically ill) and were able to protect two other children. The department of social services and housing said that it would file a Child Protective Act petition for the teenager but never did. Some counseling was offered the family, but when the teenager turned eighteen, all potential services were lost. The teenager had been known to the court for well over five years from numerous stays in the detention home. She had a long history of being a runaway. Failure of the system to investigate why she was running away served to deny her timely intervention. There is still no adequate investigation program for children who are chronic runaways or children who are repeatedly put into the detention home. Basically, the warning signs of abuse are ignored. In cases #1, #2, and #3, this resulted in siblings becoming the next victims of the perpetrators. If the first child had been successfully identified as a victim of abuse, then the abuse of the second and, sometimes, third child would have been prevented.

Case #3: The child's family had been known to the court for ten years. All four children in the family had been in trouble and had probation officers. A new guardian ad litem met one of the children for the first time in the detention home. There were no prior guardian ad litem reports in the entire case file. There were no department of social services and housing reports to indicate the extent of the child's problems. The department of social services and housing and the probation officer found the child to be uncooperative due to her chronic running away. They were recommending Koolau even though the child had only two minor contacts with the criminal justice system. The child had been diagnosed as suicidal, acted bisexual (identity disorder), and engaged in self-mutilation. Investigation by the new guardian ad litem uncovered that the child and the child's older sister had been sexually abused. Although the children and the perpetrator had been in therapy for two years, this information had not been previously uncovered. The therapist had recommended that the child not be returned after the first incident of abuse, but the presiding judge returned her to her family. She was abused a second time. Through aggressive intervention by the new guardian ad litem, the case worker and the probation officer found a suitable therapeutic placement and the child's psychological condition stabilized. Failure to find that the perpetrator was a repeat offender and failure to follow the advice of the therapist subjected the child to further abuse. Failure to identify the older sister as a victim, although she was known to the court, exposed her to harm. The self-mutilation began after the abuse, and the child is horribly scarred. Frankly, the child has a valid claim against the State for negligence. She could have sued for \$1,000,000 with the harm she sustained. When the guardian ad litem requested periodic reviews of the child's condition, the probation officer refused stating that the judge was too busy.

Appendix D

The following letter was sent to:

Ms. Evangeline Barney
Educational Specialist
Department of Education

Ms. Gail Breakey, Director
Hawaii Family Stress Center

Ms. Dorothy Bremner
Youth Affairs Officer
Office of Children and Youth

Susan Chandler, Ph.D.
School of Social Work
University of Hawaii

Ms. Moira Chin
Administrative/Technical
Services Officer
Office of Children and Youth

Corinne Christensen, M.S.W.

Margaret Egbert, Esq.
Jackman & Egbert
Attorneys at Law

Mr. Kenneth Enright
Deputy Attorney General
Department of the Attorney General

Ms. Gibby Fukutomi
Child Development Officer
Office of Children and Youth

Ms. Isabel Hacskaylo
Office of Person Abuse
Department of Health

Ms. Dee Helber
Educational Specialist
Department of Education

Ms. Millicent Honda
Program Specialist
Family Court

Dr. Henry Ichiho, Chief
Maternal & Child Health Branch
Department of Health

Mr. Stanley Inkyo
Program Administrator
Department of Health

Ms. Mae Kuramoto, Branch Chief
Public Health Nursing Branch
Department of Health

Ms. Beverly Lee
Family Court Liaison
Department of Education

Mr. Kenneth Ling, Director
Family Court

Joanne Little, M.S.W.

Ms. Patti Lyons, Director
Child and Family Services

Ms. Georgia McCauley
Office of Person Abuse
Department of Health

Dr. Denis Mee-Lee, Chief
Mental Health Division
Department of Health

Dr. Walter Nunokawa
Educational and Psychological
Intervention Center

Mrs. Genevieve Okinaga, Director
Office of Children and Youth

Ms. Betty Ona
Curriculum Coordinator/
Education Specialist
KCAA-Preschool of Hawaii

Dr. Peter Sybinsky
Administrative Assistant
to the Director
Department of Health

Ms. Betsy Uohara
Hawaii Family Stress Center

Ronaele Whittington, D.S.W.

Dr. Timmi Wong
School of Social Work
University of Hawaii

Mr. Ed Yoshimoto, Administrator
Services Program Development
Department of Social Services & Housing

Ms. Nancy Yuen
Educational Specialist
Department of Education

Samuel B. K. Chang
Director



LEGISLATIVE REFERENCE BUREAU
State of Hawaii
State Capitol
Honolulu, Hawaii 96813
Phone (808) 548-6237

August 14, 1986

3453-A

Ms. Lynda Asato
Educational Specialist, Health
General Education Branch
189 Lunalilo Home Road, 2nd Floor
Honolulu, Hawaii 96825

Dear Ms. Asato:

Enclosed is a copy of a preliminary, confidential draft of the Legislative Reference Bureau's report on child abuse and neglect services in Hawaii. The report was prepared pursuant to House Resolution No. 147, H.D. 1, adopted during the Regular Session of 1986.

Copies of the draft are the property of the Bureau, and their use should be restricted solely for the purpose of this external review. The draft is not for general distribution since it is subject to change; a copy of the final report will be transmitted to you at a future date.

We request your assistance in reviewing the draft and giving your comments on and confirming the facts presented therein. We invite you to insert your comments directly on your copy of the draft or in any other manner you find convenient. In order to make a timely submission of the recommendations to the Director of Health, as specified in the Resolution, we require that all comments be returned to the Bureau no later than 4:00 p.m. on Monday, August 25, 1986.

Please accept our sincere thanks for your assistance in this review and for your time and contributions throughout the course of this study. If you have any questions, please contact Christina Uebelein, or me, at 548-6237.

Cordially,


Richard F. Kahle, Jr.
Acting Director

RFK:ctn
Enclosure

HAWAII FAMILY STRESS CENTER

Program for Prevention of Child Abuse and Neglect

located at Kapiolani Women's and Children's Medical Center

319 Punahou Street, B208 Honolulu, Hawaii 96826 Phone (808) 947-8225

Gail F. Breakey, R.N., MPH, Executive Director

Board

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Paul S. Sakuda
Myron B. Thompson

August 25, 1986

Christina Ubelein
Legislative Reference Bureau
State Capital
Honolulu, Hawaii

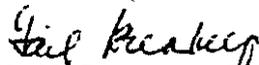
Dear Christina:

Overall, the report is impressive, as it reflects a good grasp of many of the problems involved and outlines some solutions succinctly. If the recommendations are implemented, which I am sure most would agree is key, some major steps forward would be achieved.

As I am reviewing my notes, several focus on the role of the private sector in the scheme of things. The private service providers have played a significant role in the development of child abuse services in Hawaii, both in advocating for and in pioneering the development of effective services. Yet their role in coordination and planning of services is not defined as part of the system. It would seem that this needs addressing if we are to have a truly coordinated system.

Attached are draft notes. We look forward to reviewing the final report.

Sincerely,



Gail Breakey, R.N., MPH
Director, Hawaii Family Stress Center

Organizational Structure:

All good recommendations. Re #4- information should also be available to the private providers servicing a case.

Program Administration

1. Re Secondary Prevention Advisory Committee. The legislative intent was to provide a mechanism for communication and input among private and public agencies involved in prevention of abuse among high risk families related to development of a system of services for prevention, in addition to designating the DOH as the lead agency for prevention. (As you may recall, no agency wanted to take on this responsibility). Representation of agencies with experience in the field was intentional, expecting that expertise would be utilized. That this has not happened seems to have been due to lack of commitment to this effort, at least until recently, on the part of the Department of Health and poor communication among some committee members. The committee will never be effective until it is designated a clear role and the members come together as a cooperative group.

2-5 good

6. Since you have gotten into issues related to the CPS system, in addition to needs for training and gathering of information from workers there are a range of problems of the CPS system having to do with a need for major overhaul of policies and procedures in accordance with current state of the art. Some of this has been done; some problems identified in evaluations five and ten years ago are still current.

Service Delivery

1. Good, practical approach

2. Long overdue.

3. This has been done several times to my knowledge; it doesn't seem to be followed consistently.

4, 5 Good

6. The reorganization plan proposed by Mrs. Agena several years ago provided for this and should be implemented, i.e. recognition of the special needs of adolescents and establishment of a specialized unit for this.

7. Good. The Regional Perinatal Planning Project is working on a standardized screening input with participation of HFSC, Social Services at KWCMC, CPS. Some clout in implementation will be very helpful in accomplishing universal screening which most agree is needed. However, along with universal screening must come followup resources to provide supportive intervention for high risk parents. Existing resources are completely booked by the current level of screening and assessment.

8. That's a tough one. ^{Historical} Dr. Kempe's recommendation to deal with the conflicting roles of case manager and family treatment worker was to separate the roles; the roles are not compatible. In this way your recommendation can work well, as the case manager would so inform the family, and it would lend credibility to her clout and probably facilitate case movement in a very desirable way as well.

(i.e. there must be both a case manager and treatment worker)

Budget-Making

Your discussion related to the identifiability of budget amounts allocated to child abuse and to Chapter 42 is interesting, and points out ~~some~~ pertinent factors in the present state of affairs. It not only indicates a lack of commitment to child abuse services, but also makes it difficult to determine overall costs and relative cost effectiveness of efforts such as prevention.

I would like to point out that it is a good thing that the Chapter 42 process provides for private agencies to approach the legislature directly, because over the past years the state agencies have simply not done so, except to ask for more CPS positions. There has been a dire need for development of more and new services to respond to the steady increase in volume and severity of cases, as well as to push for establishment of a prevention system, which is certainly our only hope of stemming the tide of this problem in the future.

All of your recommendations are positive and should contribute to a better system. Again, I would like to raise the issue noted in my cover letter, as to the role of the private sector in this process. While the private sector should certainly not be involved in any decision making process related to the awarding of contracts to agencies in the private sector, a joint public and private planning process should be established whereby needs and issues can be discussed and recommendations made related to community needs and effective service approaches. With the wealth of planning and communications techniques available, it should be possible to set up a process whereby interested and experienced professionals can participate effectively and equitably in planning for child abuse services for our community.



STATE OF HAWAII
OFFICE OF THE GOVERNOR
OFFICE OF CHILDREN AND YOUTH

P. O. BOX 3044
HONOLULU, HAWAII 96802

August 25, 1986

Mr. Richard F. Kahle, Jr.
Acting Director
Legislative Reference Bureau
State of Hawaii, State Capitol
Honolulu, Hawaii 96813

Dear Mr. Kahle:

Thank you for the opportunity to review the Bureau's preliminary draft of "An Examination of Child Abuse and Neglect Services in Hawaii". Christina Uebelein has tackled a huge subject in order to respond to House Resolution 147-86, H.D. 1's charge to examine, and make recommendations regarding, the coordination of prevention and treatment services for child abuse and neglect (CA/N).

I support, and find substantiation within the report for, the following recommendations regarding coordination:

1. Institutionalize techniques which require the money and services to follow the child, rather than to have the child chase after, or not get, the money and services (pp. 6 and 7);
2. Alleviate the resource deficiencies which contribute to friction between agencies; e.g., provide more resources for adolescents (p. 15);
3. Pinpoint direct expenditures for CA/N prevention and treatment services in the various agency budgets (p. 17) in order to examine how to maximize resources.

My suggestions for improvement to the report follow.

Page 7

The discussion on page 7 of fragmented, conflicting legislative directives is good, and should be followed up with a recommendation to review and amend laws so that the legislature's policy directions regarding CA/N prevention and treatment are clear.

Mr. Richard F. Kahle, Jr.
August 25, 1986
Page 2

Page 8

The Office of Children and Youth (OCY) is not a good example to support the statement that "program administrators keep scrupulously, even overscrupulously, within the limits set by statute . . ." OCY recognizes, and responds to, the fact that its statute is wide-ranging, but we are hindered by a small staff and budget. Additionally, as is wisely stated in the report, effective coordination efforts depend on the acceptance of those being coordinated. No single agency can assume the leadership role in coordinating all programs and services for children and youth. In fact, each agency is expected to coordinate with other agencies on a routine basis. There is no need or authority for OCY to be involved in these coordinating activities. It is only when coordination is not happening or is insufficient that OCY may become involved. Sometimes agencies request help. Other times, OCY initiates coordination efforts by gaining agreements among the agencies to sit down together. I believe that the full text of OCY's June 13, 1986 letter to Ms. Uebelein (attached) elaborates on these points.

Page 10

It is a good idea to involve the superintendent of education more directly in coordination of child abuse and neglect matters. However, a recommendation to this effect needs exploration and substantiation in the report.

Page 15

I agree with the need to address the very real problem of how case workers can effectively perform their dual role of family counselor and expert witness in court, possibly against that same family. However, I do not understand how recommendation #5* would be implemented.

*Report's recommendation that "The family court develop rules of evidence raising the burden of proof requiring the prosecutor to show that testimony by public health nurses and child protective services case workers are in the best interests of the child, bearing in mind that these nurses and case workers have gained the trust of the family, will violate that confidence in court, and may have to attempt to regain it depending on the decision of the court."

Mr. Richard Kahle, Jr.
August 25, 1986
Page 3

Service Delivery and Budget-Making Sections

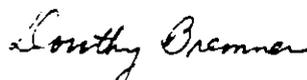
The report alludes to how plans which address discrete problems such as mental health, juvenile delinquency, runaways, substance abuse, and teen pregnancy also serve to prevent child abuse and neglect. Conversely, plans which address child abuse and neglect also serve to prevent juvenile delinquency, mental illness, or several other problems. I would therefore suggest that planners, evaluators, and decision-makers be cognizant of these beneficial effects on and related expenditures for CA/N prevention without wasting time on identifying money appropriated for these related problems as money designated for the prevention of CA/N. The interrelationship of programs in CA/N prevention is an important point for both the Service Delivery and Budget-Making sections of your report. I do agree that funds clearly designated to assist CA/N victims, their families, and the perpetrators should be pinpointed in budgets as CA/N services.

Page 17

The report's valid emphasis on the overburdened staffs and insufficient resources should be followed up with a recommendation for additional resources to be directed to CA/N prevention and treatment. Jurisdictional disputes should decline and integrated services increase as sorely-needed additional resources are provided to strengthen each agency's ability to carry out its mission.

I hope these remarks are helpful. Please call me at 548-7582 or 548-7583 if there are any questions.

Sincerely,



Dorothy Bremner
Youth Affairs Officer



GENEVIEVE T. CANAGA
DIRECTOR

STATE OF HAWAII
OFFICE OF THE GOVERNOR
OFFICE OF CHILDREN AND YOUTH
P. O. BOX 3044
HONOLULU, HAWAII 96802

June 13, 1986

Ms. Christina Uebelein, Researcher
Legislative Reference Bureau
State Capitol
Honolulu, Hawaii 96813

Dear Ms. Uebelein:

It is a common misperception that only funds designated for specific CA/N services will prevent and treat the child abuse and neglect (CA/N) problem. There are other SERVICES WHICH ARE CLEARLY CA/N PREVENTION AND TREATMENT SERVICES BUT ARE LABELLED AND ADMINISTERED UNDER CATEGORICAL NAMES SUCH AS HAWAII YOUTH CORRECTIONAL FACILITY (HYCF), ADOLESCENT UNIT, LEAHI CHILDREN'S INPATIENT UNIT, DETENTION HOME, PLACEMENT SERVICES, HANDICAPPED, SUBSTANCE ABUSE, TEEN PREGNANCY, AND STATUS OFFENDERS. In my opinion, when funds are not allocated to these related services for at-risk children, CA/N is essentially promoted.

The CA/N factor in the lives of the at-risk children and youth served by these programs is underscored by the following points:

1. Many clients, although being treated for something else, have CA/N in their history or their future. For example,
 - a. All patients at the Adolescent Unit were victims of sexual abuse.
 - b. Female runaways are often running from sexual abuse.
 - c. It is suspected that troubled youth, whose status offenses and law violations are being addressed now, were probably CA/N victims when they were younger.
 - d. Children of teen parents are at increased risk for CA/N.
 - e. Very few youths at HYCF are connected to a family.
2. Several types of the at-risk children are at special risk for CA/N; e.g., handicapped, emotionally disturbed.

Ms. Christina Uebelein

June 13, 1986

Page 2

3. Clients needing out-of-home placement are open to the possibility of institutional abuse; i.e.,
 - a. Specific abusive acts by foster parents or by workers at Detention Home, HYCF, or group homes.
 - b. Inappropriate placement; e.g., Detention Home is overused for lack of anywhere else to place many youth.

Coordination of these varied services is needed to combat the problems of (1) divided, and possibly conflicting, planning efforts by the individual agencies and (2) jurisdictional disputes between agencies. (Examples of these problems and the coordination activities to address them are presented in Attachment A.)

OCY'S COORDINATION RESPONSIBILITY EXTENDS TO ALL THESE SERVICES ON A SELECTIVE BASIS, according to HRS Chapter 581 as amended by Act 297, SLH 1980. This selective responsibility was assigned to OCY on the premise that large organizations by their nature will develop kinks and gaps that a nonadversarial, troubleshooting organization can help to identify and improve. HOWEVER, OCY'S COORDINATION RESPONSIBILITY IS CURTAILED IN TWO RESPECTS: CAPACITY AND AUTHORITY.

1. Capacity. When the Legislative Reference Bureau (LRB) recommended an interagency coordination function, as well as seven other functions, for the proposed Office of Children and Youth, the Bureau also recommended that the new office start out with a 17-member staff, computer capacity, and a first-year budget of \$334,759 (11/18/76 LRB testimony is Attachment B). Instead, after ten years in existence, the Office has only a 9-member staff and an annual budget of \$258,453. So OCY has not been provided the necessary tools to perform its wide-ranging mandate.
2. Authority. No entity in the state has the authority to require public and private agencies from different levels and branches of government to participate in coordinating activities or to implement the recommendations of coordinating bodies. Coordination efforts and their attendant monitoring are often resented, because they interfere with the "autonomy" of both the public and private sector. Agencies often feel threatened and overworked when an interagency group asks for information and changes in operations and priorities. Thus, success of coordinating activities is dependent on the benefits to the participating organizations and on the clout and effectiveness of the lead coordinating office.

I am concerned that OCY's future clout has been diminished by the recent Executive Salary legislation. Of course, salary levels have always shown us that the state does not attach very much importance and status to advocacy. For example, the Public Defender and the Consumer Protector are at a lower salary than the manager of Aloha Stadium! In OCY's case, when

Ms. Christina Uebelein
June 13, 1986
Page 3

the Legislature created the Office, it appropriately supported a director equivalent to the second deputy level. However, the recent salary legislation downgraded the director's salary to the same level as deputy commissioner of the credit unions. This downgrading will make it more difficult for the incoming director to deal with department directors and their deputies on a collegial level. The current director has had the advantage of being paid and therefore perceived at the second deputy level.

Due to finite resources of this Office and to insure effectiveness, OCY has been highly selective in its projects. OCY's decisions on project selection, which are approved by the governor, are based on such considerations as:

- the degree of impact the problem has on children and youth;
- how long-standing the problem has been;
- the degree to which operating agencies and/or organizations are attending to resolve the problem;
- the existing and new resources required to resolve the problem; and
- the feasibility of OCY's effectiveness to assist in resolving the problem (e.g., if the direct service agency resists OCY involvement, we do not press since there are other equally important problem areas to which we could extend our assistance.)

On coordination, it must be remembered that every agency has its level of coordination duties to perform both internally and interagency-wide. The particular level of coordination statutorily mandated of OCY, and not charged to any agency, is to promote coordination of necessary planning and service activities if such coordination is not in effect.

OCY projects in mental health, placements, education, and HYCF have added important dimensions to our understanding of the CA/N problem. Please call me at 548-7582 or 548-7583 if you wish to discuss my conviction that the CA/N issue encompasses many more clients and service systems than is commonly thought.

Sincerely,


(Mrs.) Genevieve T. Okinaga
Director

Attachments



STATE OF HAWAII
OFFICE OF THE GOVERNOR
OFFICE OF CHILDREN AND YOUTH

P. O. BOX 3044
HONOLULU, HAWAII 96802

August 25, 1986

Mr. Richard F. Kahle, Jr.
Acting Director
Legislative Reference Bureau
State of Hawaii, State Capitol
Honolulu, Hawaii, 96813

Dear Mr. Kahle:

Considering the short time frame in which Ms. Uebelein was expected to complete her report and considering the mammoth scope of the subject matter -- child abuse and neglect (CA/N) services in Hawaii, Ms. Uebelein should be commended for her efforts.

My comments/recommendations for improvements include the following:

1. Recommendations - General Impression

The report provides some specific recommendations which were not directly discussed in each section. This confuses the users of the report since generalized problem statements led to specific conclusions (e.g., recommendation for pre-service training and exit interviews in the section on program administration)

It would be more helpful if general statements led to more general recommendations (if all the facts are not known); or, better, if specific factual statements led to specific recommendations.

2. Methodology of Report

A short section describing the methodology by which the report was written as well as a section describing the limitations of the report should be included.

This methodology is needed to provide a general framework for the users of the report to understand how the report was compiled. Specifically, (1) the source of the data and information; (2) the process by which the data and information were compiled; (3) the limitations of the report and (4) if more time and more resources were available, other areas which would have been further discussed.

Mr. Richard F. Kahle, Jr.

August 25, 1986

Page 2

Without such a section, the users of the report is left to ponder its validity. Whereas, if the focus of the report is to provide solid recommendations for public agencies to reflect on, the author's source and process as well as self-proclaimed limitations and gaps need be foretold.

3. Section on Program Administration

The example of the director of the Office of Children and Youth (OCY) as a program administrator who keeps scrupulously, even overscrupulously, within the limits set by statute and does not avail of the marginal possibilities for action and influence is inaccurate. With limited staff and resources, efforts are limited. Additionally, it is presumptuous to assume that the director of OCY should have risen above as the leader to coordinate major cabinet level departments in CA/N. A discussion of coordination activities was fully discussed in the June 13, 1986 letter referenced in the report.

However, the director has served to carry out her mandated duties by promoting coordination in the following general ways [Note: More specific detailed accounts of activities can be provided if requested.]:

- a. By preparing and updating inventories of CA/N services--one of a kind document used by many public and private service providers;
- b. By preparing other reference documents such as planning specifications, models of a statewide interagency coordination council on CA/N and on child sexual abuse and pedophilia, among others.
- c. By participating in and by providing input and leadership into many CA/N-related activities for all departments involved spanning all levels of government including county, state and federal and the private sector.

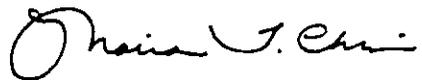
4. Recommendation that OCY compile empirical data regarding CA/N case processing

Without additional manpower or resources, OCY is not able to compile empirical data on CPS case processing. Additionally, it is more appropriate if DSSH is provided the opportunity to police its own case processing.

Mr. Richard F. Kahle, Jr.
August 25, 1986
Page 3

Thank you very much for the opportunity to review the preliminary draft report. Should you have any questions, please call me at 548-7582 or 548-7583.

Sincerely,



Moira T. Chin
Administrative and Technical
Services Officer

Reenie Christensen, MSW, ACSW

Clinical Social Worker

45-637 Nawahine Loop
Kaneohe, Hawaii 96744

August 20, 1986

Legislative Reference Bureau
State of Hawaii
State Capitol
Honolulu, Hawaii 96813

Dear Ms. Uebelein:

I have reviewed the draft on child abuse and neglect services in Hawaii and found it to be a very comprehensive and informative report.

This is an urgent issue and to date, there have been insufficient solutions to deal adequately with the delivery of these complex services. I fully concur with your delineated recommendations for integration and strongly support your conclusion that " the children are more important than the system. "

It is with this belief that I urge the Director of Health to consider the recommendations in this report and take appropriate action.

Sincerely,



Corinne Reenie Christensen, ACSW

CRC/sc



GEORGE R. ARIYOSHI
GOVERNOR

CORINNE K. A. WATANABE
ATTORNEY GENERAL

RUTH J. TSUJIMURA
FIRST DEPUTY ATTORNEY GENERAL

STATE OF HAWAII
DEPARTMENT OF THE ATTORNEY GENERAL
STATE CAPITOL
HONOLULU, HAWAII 96813
(808) 548-4740

August 25, 1986

Christina Uebelein, Esq.
Legislative Reference Bureau
Hawaii State Capitol
Honolulu, Hawaii 96813

Dear Ms. Uebelien:

As we discussed this date, I have been out of town and have not had an opportunity to review your report in detail. In order to meet today's deadline for comments, I am submitting my initial impression as to only the area entitled "Service Delivery" as it concerns proceedings in Family Court. I suggest you consider discussing the distinction between the civil and criminal proceedings in Family Court because blending the two different systems will be potentially confusing.

Thank you for your excellent report and your consideration of the foregoing comment.

Very truly yours,


Kenneth E. Enright
Deputy Attorney General

JACKMAN & EGBERT

Attorneys at Law

Suite 1010
1064 Bishop Street
Honolulu, Hawaii 96813
(808) 531-4641
Bill Jenya Jackman
Margaret Ann Egbert
Fritz McKenzie
of Counsel

August 26, 1986

Dear Ms. Uebelein,

Thank you for the preliminary draft of your report. I would like to comment on an area that was not covered in your report and that is the interaction of CPS in a case where the child is known to the Court under HRS 571 which covers status and criminal offenses. It has been my experience that when a child is known to the Court and is already under jurisdiction, no action is filed under the Child Protective Act HRS 587.

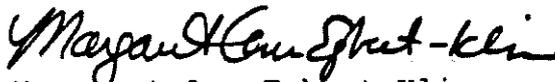
The effect of the failure to file a 587 petition with concurrent jurisdiction to the 571 action is that the child under 571 does not get the same services under 587. In order to point out the differences I have summerized the two processes as I have experienced them in the following chart. I would like to emphasize that this is my experience and that the experiences may not reflect the original thinking or ideology behind the interaction of the two statutes.

1. The child is seen as a perpetrator.
2. The child has a probation officer who is trained for criminal procedure.
3. The child has to follow rules of probation. Failure to follow the rules is a criminal violation subject to criminal sanctions.
4. Koolau is considered a suitable placement.
5. The child comes before a judge who may or may not handle child abuse cases on a regular basis.
6. The child may or may not have a Guardian ad Litem. The GAL may be discharged even though the child is still under the Court's jurisdiction.
7. There may or may not be an investigation to uncover abuse and perpetrators. CPS may or may not be involved. The PO may or may not investigate.
8. The child may spend a short or long time in Detention Home.
9. The child is usually a teenager.
10. There may or may not be a service plan.
11. There is no mandate for permanency planning.

1. The child is seen as a victim.
2. The child has a social worker who focuses on therapeutic intervention.
3. The child has to follow a service plan. Failure does invoke criminal procedure.
4. Koolau is not considered a placement alternative.
5. The child comes before a judge.
6. The child has a Guardian ad Litem who serves until the case is closed.
7. There is an investigation of the alleged abuse by CPS, the GAL and HPD.
8. The child is placed in emergency shelters and emergency foster homes.
9. Teenagers do not make up the majority of the cases.
10. A service plan is mandated by law and family members must participate.
11. There is a mandate for permanency planning.

Use of a 571 to protect the child is not working. The child does not get the same services. More specifically the attitude towards the child is damaging. The child is treated as if he or she is responsible for his or her problems. The child is constantly threatened with punishment in order to get desired behavior from the child. This goes completely against basic behaviorist principles and this approach towards the child exacerbates the problem. In addition to being denied adequate protection. Resources for teenagers are scarce. For teenagers with serious problems they are almost non-existent. This state needs to make a full commitment to helping all children. We need to spend money on needed programs. We need to treat the children equally regardless of how a child first came to the Court's attention. Failure to turn teenagers around guarantees that the teenagers will be maladapted adults who will become a burden on the social system.

Sincerely,



Margaret Ann Egbert-Kline
Attorney-at-Law

GEORGE R. ARIYOSHI
GOVERNOR



GENEVIEVE T. OKINAGA
DIRECTOR

STATE OF HAWAII
OFFICE OF THE GOVERNOR
OFFICE OF CHILDREN AND YOUTH
P. O. BOX 3044
HONOLULU, HAWAII 96802

AUG 22 1985

Mr. Richard F. Kahle, Jr.
Acting Director
Legislative Reference Bureau (LRB)
State Capitol, Room 004
Honolulu, Hawaii 96813

Dear Mr. Kahle:

SUBJECT: LRB Report - "An Examination of Child Abuse and Neglect Services in Hawaii," Prepared by Christina Uebelein

Thank you for the opportunity to review the preliminary draft of this report. Ms. Uebelein should be acknowledged for her attempt to address such a large and complex issue in the brief period allotted.

There have been a number of attempts in the past by a number of professionals from a number of agencies/organizations to examine and document what Ms. Uebelein refers to as the problematic "elephant of parable." They too have found that it is a large phenomenon with many avenues for generalization.

More recently, the Office of Children and Youth (OCY) has come out with a report (in draft) entitled Specifications for the Development of a Child Abuse and Neglect Prevention and Treatment Program in Hawaii. (A copy is enclosed for your use. A copy was shared with Ms. Uebelein earlier.) This document attempts to construct a general conceptual framework for program planning and development to address the "whole child" -- more appropriately the "whole family" -- needs of this confirmed and at-risk target group.

The intent of some of Ms. Uebelein's remarks/recommendations is generally in keeping with the service improvement recommendations found in our specifications document, including:

1. The "whole child/whole family" multidisciplinary approach to helping multiproblem families.

Mr. Richard F. Kahle, Jr.

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2. The importance of a coordinated response when employing a multidisciplinary approach.
 - a. Coordination can facilitate intervention by assuring that the activities of service providers are not viewed in isolation but as part of a comprehensive service strategy focused on the client's needs/problems.
 - b. Coordination can limit unnecessary duplication and can maximize limited resources.
 - c. There are three basic types of coordination that should be going on: planning coordination, services coordination (case planning/case management/case tracking), and funding coordination.
3. The importance of assuring that needed services are available and utilized, e.g.:
 - a. Services for child sexual abuse victims, perpetrators, and other members of the dysfunctional family.
 - b. Services for maltreated adolescents.
4. The importance of realizing that the child abuse/neglect (CA/N) service delivery system is not an isolated sector of distinct services. It is in fact closely interlinked and reliant on other service delivery systems, e.g., the mental health services delivery system, the placement services delivery system, the special education and handicapped services delivery system, the child care service delivery system, the maternal and child health services delivery system, the public health nursing service delivery system, the family planning and teen pregnancy control services delivery system, the substance abuse services delivery system, the criminal justice system, the income maintenance and poverty control services system, the housing assistance system, and the employment assistance system.
5. The importance of getting other departments/agencies/organizations to realize that, because of this interlinkage and reliance, it is important for all of us, as a matter of policy, to commit ourselves to finding ways our existing service delivery structures can be positively utilized to help in CA/N prevention and treatment. We are very fortunate to have both within State government and in the private sector many dedicated professionals who over the years have pushed for widespread responsibility and involvement.

Mr. Richard F. Kahle, Jr.

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Page 3

Listed below are some of the areas in the LRB report which would benefit from additional knowledge, understanding or clarification of the problems cited:

1. Page 8

It is implied here that OCY is an example of program administrators who "keep scrupulously, even overscrupulously, within the limits set by statute..." The statement further implies that this is a bad thing to do.

It is my belief that there are reasons for laws and that policy makers pass them with the expectation that those charged with executing the laws will respect those laws including its limitations which may have been so defined for legislative and policy reasons.

It is also my belief that OCY respectfully tries to utilize the liberal construction of its law to the extent that resource limitations, e.g. having a small staff and a small operating budget, permit and to the extent that our efforts will not in any way duplicate efforts and/or responsibilities already in place in other existing agencies/departments.

It should be made clear that some form of coordination between departments/agencies has and will continue to take place with or without an agency to promote coordination. However, an agency like OCY, where one of its many functions is to promote coordination, can be most useful when interdepartmental/interagency coordination breaks down and the parties involved welcome third party assistance. A body promoting coordination can also be most useful in removing some of the barriers that diminish productive coordination, e.g., lack of awareness of existing services, lack of hard-data needs/resource assessment documentation, limited channels for information-sharing between Neighbor Island programs and Honolulu-based coordinators/planners, limited channels for communication between different service delivery systems at the program policy and planning levels.

OCY has attempted to deal with some of these identified barriers within the restrictions and confines that often hold a small staff with a small operating budget in leash.

One of OCY's efforts resulted in the publication of the Inventory of Child Abuse/Neglect Services in Hawaii (1977) developed in response to expressed community need. Updates were published in 1978, 1980, and 1983.

Mr. Richard F. Kahle, Jr.

AUG 22 1996
Page 4

Another was the specifications document discussed earlier. This specifications document was an opportunity for our Office to focus the expertise of many on the problem without, at the same time, duplicating or interfering with the ongoing coordination efforts of involved departments/agencies.

The cooperation of these professionals, many of whom had taken on this additional task despite an overwhelming workload, is a testament to their motivation and commitment. All agreed that an assessment of needs and of existing resources was in order. All agreed that such a mapping of needs and resources would enhance planning and management decisionmaking. All agreed that documentation is important because it enables decisionmakers at all levels, e.g., at the line worker level, at the program planning level, at the State budget planning level as well as other budget planning levels (i.e., county and federal), to see what actions are needed to address the problem. All saw this as an initial first step to more specific program plans by the departments.

There are many other examples I could cite, but will not in the text of this letter. I do think that further research into OCY's efforts will reaffirm our contributions in "promoting" and facilitating coordination.

2. Page 15

It is unclear what is meant by recommendation #5. Does this mean that before the prosecuting attorney can call public health nurses and child protective services case workers to testify as an expert witness in a criminal proceeding, the prosecuting attorney must present arguments to the judge convincing the criminal court judge that this is in the best interest of the child?

As we noted in our specifications document, lengthy preparation for prosecution, the adversarial nature of criminal court proceedings, and defense strategies to deny or refrain from admitting guilt can sometimes work against efforts to help save the family, which in most instances is in the best interest of the child. I am not sure if this recommendation is the best alternative for addressing the problem, but it should definitely be discussed and examined further.

3. Purpose of Report

It is unclear whether this report addresses the legislative request specified in HR 147, HD 1.

Mr. Richard F. Kahle, Jr.

AUG 22 1986
Page 5

HR 147, HD 1 requests LRB to:

- a. Examine the lack of coordination among public agencies in CA/N primary and secondary prevention, crisis intervention, and treatment programs;
- b. Provide recommendations for effecting better coordination of CA/N services among public and private agencies involved in CA/N; these recommendations are to be submitted to DOH by 9/1/86.

It would enhance the clarity of this report if, first, LRB were to present its findings substantiating a lack of coordination among public agencies. Once this has been established, the second step should be to identify exactly what are the coordination problems or the barriers to coordination. Then, based on its findings, LRB should align its recommendations to the specific coordination problems or barriers that research has substantiated.

I hope this is useful to you. If there are any questions, please call me at 548-7582 or 548-7583.

Sincerely,

G. N. Fukutomi
Gayle N. Gibby Fukutomi
Child Development Officer

Enclosure

MEMORANDUM

Date August 25, 1986

TO: Christine Uebelein
FROM: Isabel Hacskaylo
SUBJECT: An Examination of Child Abuse and Neglect Services in Hawaii

Thanks for a wonderful job! I have a few other comments which are written into the body of the study.

GEORGE R. ARIYOSHI
GOVERNOR OF HAWAII



LESLIE S. MATSUBARA
DIRECTOR OF HEALTH

STATE OF HAWAII
DEPARTMENT OF HEALTH

P. O. BOX 3378
HONOLULU, HAWAII 96801

In reply, please refer to
File:

August 25, 1986

Richard F. Kahle, Jr.
Acting Director
Legislative Reference Bureau
State Capitol
Honolulu, HI 96813

Dear Mr. Kahle:

Thank you for the opportunity to review the draft of the Legislative Reference Bureau's report on child abuse and neglect services in Hawaii.

In reviewing the report, it lacked the "comments by" section, as identified in the table of contents. The only comment that I have is on page 15, item #7, related to standardized screening instruments. I do need some assistance with its clarification. "Public hospitals" usually refer to government operated hospitals. If so, only the neighbor island County/State hospitals will be involved, as Leahi and Maluhia Hospitals and Waimano Training School and Hospital for the mentally retarded are long-term care facilities, and Hawaii State Hospital is primarily for the mentally ill on Oahu. If we are to concertededly work towards collaborative and coordinated identification, treatment, and evaluation of child abuse and neglect cases between private and public sectors, shouldn't the involvement of private sectors be considered, or is this an issue which needs addressing at another time? The statement of "private physicians using public facilities throughout the state" under the same item also raises similar concerns.

Ms. Christine Uebelein is congratulated for a fine job she did in researching and preparing the document. Her very professional manner in the conduction of the interview also needs recognition.

I look forward in receiving a copy of the final report and becoming involved in the recommendations proposed in the report.

Sincerely,

A handwritten signature in cursive script, appearing to read "Mae N. Kuramoto".

MAE N. KURAMOTO
Chief
Public Health Nursing Branch

MNK:gp



STATE OF HAWAII
FAMILY COURT
FIRST CIRCUIT

P. O. BOX 3498
HONOLULU, HAWAII 96811-3498

DISTRICT FAMILY JUDGES

ARNOLD T. ABE
DARRYL Y.C. CHOY
EVELYN B. LANCE
MARJORIE HIGA MANUIA
MICHAEL A. TOWN
FRANCES Q.F. WONG

August 20, 1986

Mr. Richard F. Kahle, Jr.
Acting Director
Legislative Reference Bureau
State of Hawaii
State Capitol
Honolulu, Hawaii 96813

Dear Mr. Kahle:

Subject: An Examination of Child Abuse
and Neglect Services in Hawaii

We appreciated the opportunity to review and comment on the preliminary draft report on child abuse and neglect services in Hawaii. This submittal is a consolidated response on your separate requests to me and Program Specialist, Millicent Honda, to review the draft.

Comments were noted directly on pages 15 and 17 relating to recommendation numbers 5 and 3 respectively, principally to suggest that they be re-reviewed for the purpose of clarification for the reader.

Your findings of the three case illustrations described in Appendix C are evidently included to document the lack of appropriate and critically needed responses by the helping agencies reported to have been involved including the court. We are certain that you will agree with us that these case situations as cited should be accurately portrayed based on verifiable case information. We simultaneously believe that we have a responsibility to improve services and to correct deficiencies in services should such be identified which is also the premise of H.R. No. 147, H.D. 1 and this study and report. For these reasons, we are requesting the names of the children referred to in Appendix C for the court's appropriate review. As an example, the following statements are made in "Case 2":

The teenager had been known to the court for well over five years from numerous stays in the detention home.

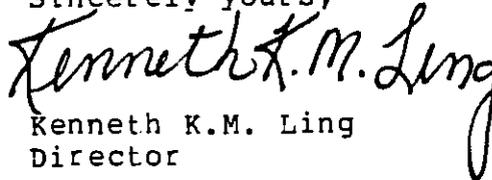
Mr. Richard F. Kahle, Jr.
August 20, 1986
Page Two

She had a long history of being a runaway. Failure of the system to investigate why she was running away served to deny her timely intervention. There is still no investigation program for children who are chronic runaways or children who are repeatedly put into the detention home. Basically, the warning signs of abuse are ignored.

Should this case be within the Family Court, First Circuit, there is indeed an "investigation program" assumed by intake social work staff assigned at Hale Ho'omaluu, our juvenile detention facility. Also, as statutorily mandated, the Family Court's policy requires the prompt reporting to the proper authorities, children who are believed to have been abused or neglected or threatened with abuse or neglect.

We appreciated the bureau's time and effort involved in having done this important study. We look forward to hearing from you regarding our request and to continued participation in serving the interest of children.

Sincerely yours,


Kenneth K.M. Ling
Director

KKML:sam

cc: Betty M. Vitousek, Senior Judge
Millicent Honda, Program Specialist

JOANNE M. LITTLE, MSW

988-2188

CLINICAL SOCIAL WORKER
CHAMPUS CERTIFIED

PO 37575 Honolulu, Hi. 96837

August 20, 1986

Christina Uebelein
Legislative Reference Bureau
State Capitol
Honolulu, Hawaii 96813

Dear Ms. Uebelein:

Thank you for this opportunity to respond to the preliminary draft entitled "An Examination of Child Abuse and Neglect Services in Hawaii." I would like to commend you for presenting such a thorough and articulate investigative report.

Over the years, I have worked in direct services in the Honolulu community with many cases involving child abuse and/or neglect. I have repeatedly encountered a lack of coordination of services, duplication of services, and an exceptionally high turn-over of case workers. These problems have increased individual's levels of stress in situations which had already reached crisis proportions.

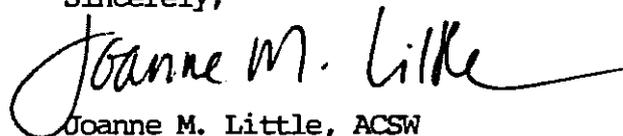
I am in total agreement with your findings and recommendations in all categories and especially in the area of prevention services.

I would like to advocate that a standardized follow-up procedure be added to the list of recommendations in the service delivery area. This follow-up procedure could be implemented in closed cases where child abuse/neglect had been confirmed and also in cases where the child had been returned to the home after foster care.

I support the Bureau's strong recommendation that the task force and director of health move toward a "true system of integrated services"; that both treatment and prevention services focus primarily on protecting the child from abuse and neglect; and most importantly, that the urgency of the problem of child abuse and neglect be identified with the children and not the system.

I intend to follow the progress of this report and invite you to call on me if I can be of any assistance in the future.

Sincerely,


Joanne M. Little, ACSW

GEORGE R. ARIYOSHI
GOVERNOR OF HAWAII



CHARLES G. CLARK
DIRECTOR OF HEALTH

STATE OF HAWAII
DEPARTMENT OF HEALTH

P. O. BOX 3378
HONOLULU, HAWAII 96801

In reply, please refer to
File:

August 25, 1986

Mr. Richard F. Kahle, Jr.
Acting Director
Legislature Reference Bureau
Hawaii State Capitol
Honolulu, Hawaii 96813

Dear Mr. Kahle, Jr.

I have just finished reading the Preliminary Draft An Examination of Child Abuse and Neglect Services in Hawaii, by Christine Uebelein. As one of the persons who supported the concept of H.R. 147 and the idea of an Legislative Reference Bureau study I am delighted with the resulting study.

Ms. Uebelein should be commended for her outstanding efforts. In a short period of time she undertook a complex task, proceeded in a very professional manner, and produced a useful insightful document.

My only hope is that her recommendations will be addressed with the same vigor, speed, and commitment as she displayed in taking on this work. I appreciate your support of this special issue.

Sincerely yours,

Georgia McCauley
Program Specialist
Office of Person Abuse Prevention
Department of Health

GMC:am



University of Hawaii at Manoa

Department of Psychology
2430 Campus Road • Honolulu, Hawaii 96822
Cable Address: UNIHAW

August 21, 1986

Ms. Christina Uebelein
Legislative Reference Bureau
State Capitol
Honolulu, Hawaii

Dear Chris:

Thank you for the opportunity to review the draft copy which I am returning with my assurance that no one else has read my copy nor reproduced it in any way.

It's well known that coordination of child abuse and neglect services is nation-wide, and the concerns and problems of many agencies verify the observations reported in your draft document. It was certainly clear during the war on poverty days when well-intentioned people were falling over one another to uplift the poor.

My personal view is that a comprehensive data base is absolutely essential if coordination is to be successful. Unfortunately, the Office of Children and Youth which is charged by statute to coordinate service delivery programs was denied the three requested positions for the continued development of the information base.

The only viable procedure that I can think of is for the supreme authority of the State of Hawaii to get behind this need for coordination to ensure that his directive is carried out effectively.

With warm regards,
(Aloha me ke pumehana)

Walter Nunokawa, Ph.D.
Professor

WN:gse



STATE OF HAWAII
OFFICE OF THE GOVERNOR
OFFICE OF CHILDREN AND YOUTH
P. O. BOX 3044
HONOLULU, HAWAII 96802
August 25, 1986

Mr. Richard F. Kahle, Jr.
Acting Director
Legislative Reference Bureau
State of Hawaii, State Capitol
Honolulu, Hawaii 96813

Dear Mr. Kahle:

Thank you for the opportunity to review and comment on the Bureau's draft report, "An Examination of Child Abuse and Neglect Services in Hawaii" by Christina Uebelein. My comments are based on over twenty (20) years experience as a social worker, classroom teacher, school administrator, state planner and program analyst, and for the past ten (10) years as the first director of the Office of Children and Youth (OCY). Pagination references, as applicable, are provided for your convenience.

Page 8: The draft report states, "at the same time, program administrators keep scrupulously, even over-scrupulously, within the limits set by statute and do not avail themselves as fully as they could of the marginal possibilities for action and influence open to them. For example, the director of the Office of Children and Youth is empowered by statute to 'serve as the principal official in state government responsible for promoting the coordination of programs and services in behalf of children and youth.'" (Underscore added.)

First, I believe that program administrators are expected to be "...scrupulously within the limits set by statute;" that is, to be conscientiously and carefully exact and precise in complying with the law. For the Legislative Reference Bureau, of all offices, to suggest otherwise is antithesis to one of the Bureau's major function to conduct impartial research, including legal research. (HRS Chapter 23G)

Second, it should be made clear that HRS Chapter 581-2 (1) as amended by Act 297, SLH 1980 mandates OCY for "...promoting the coordination..." not to coordinate. The function of promoting, that is, encouraging the existence or progress of coordination is obviously different from actually doing the coordination. As emphasized earlier to your researcher in my letter dated June 13, 1986,

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"On coordination, it must be remembered that every agency has its level of coordination duties to perform both internally and interagency-wide. The particular level of coordination statutorily mandated of OCY, and not charged to any agency, is to promote coordination of necessary planning and service activities if such coordination is not in effect." (First underscore added.)

Again, you will note that I state that the OCY promotes coordination as clearly mandated by law.

The selective basis for promoting coordination is an obvious management necessity. Given the limited funding and staffing of the OCY, it is simply not possible to promote coordination of all children and youth programs and services.

Third, the OCY's track record is exemplary in availing itself to sources beneficial to the cause of child abuse and neglect (CA/N), including the promotion of coordination. In spite of a small staff ranging from a single researcher to an additional three planner positions to conduct advocacy efforts on a selective basis [HRS Chapter 581-2 (3)] for children and youth, ages birth - 24 years old (over 40% of the state's population) [HRS 581-4 (1) (2)], the OCY has succeeded in tapping and influencing significant sources at federal, state and county levels in both the public and private sectors to promote coordination, to fill gaps in services and to improve the quality of services in CA/N. Space does not permit including all examples but those cited in this response should refute the Bureau's use of OCY as an example of an agency not availing itself as fully to possibilities of action and influence.

At the federal level, the OCY worked with U.S. Senator Daniel K. Inouye who initiated and succeeded in obtaining Congressional appropriations: (1) for CA/N and spouse abuse programs for military families (Defense Department), (2) for family advocacy programs for the Coast Guard (Transportation Department), (3) for the tri-services Military Family Advocacy Coordinating Council (OCY serves on this Council), and (4) for the military resources center in CA/N established in Hawaii, and now institutionalized to serve all services.

Other examples of federal level activities of OCY included changing the State grant-discretionary grant formula to increase the state grant portion and to testify before Congressional committees to re-authorize continued funding for the National Center for Child Abuse and Neglect. This was done in my capacity as a member of the National Board on CA/N appointed by the U.S. Secretary of Health and Human Services.

The current federal level activity initiated by OCY and also in my capacity as the national president of state directors of child development (NASDCD) is to develop awareness of an aspect of child sexual abuse, that

Mr. Richard F. Kahle, Jr.
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of pedophilia, commonly known as the "child lover" sickness which require specialized prevention efforts, disposition, treatment and monitoring of the abusers. Additionally, OCY and NASDCD have initiated a national movement to re-elevate the Children's Bureau in the federal hierarchy.

At the State levels, the OCY published the State's first Inventory of Child Abuse and Neglect Services in Hawaii (1977) (Updated 1978, 1980, 1983) within the first year of OCY's existence. This was deemed necessary as an OCY project because the key public and private agencies in CA/N services reported that they were unable to undertake this task. THIS TYPE OF INFORMATION IS BASIC TO COORDINATION, and it is our hope that the Bureau will recommend that this task be assumed by an appropriate CA/N service agency. OCY is not in the primary business of publishing inventories of multi-agency services in a given field of services. OCY basic data and information books are global by target groups of birth - 4 years of age, five - 12 years of age, 13 - 18 years of age and 18 - 24 years of age.

They provide the basic demographic data, identify critical (life or death or crippling) problems for the given target group, and provide an inventory of services related to the identified problems. Unfortunately, these basic data books by target groups can no longer be updated with the deletion of the two OCY information managers and one clerical position. It is our hope that the Bureau will recommend the reinstatement of these positions since they are basic to coordination in planning and service delivery.

Other state level activities included initiating and assisting to coordinate intradepartmental and interdepartmental assessment for additional Child Protective Services (CPS) workers, social service aides, state attorneys for CPS and legal support positions. This resulted in 36 additional CPS positions (1981), 1 deputy attorney general and several legal support positions. Again in 1984, the need for stabilized CPS staffing was brought to the attention of the director of the Department of Social Services who immediately launched into assessment and a budget request which resulted in 60 additional CPS positions and 8 additional deputy AG positions in 1985.

Examples of County-level and private sector activities in promoting coordination include initiation of and assisting the former mayor of Maui County to establish its first youth shelter with federal and county resources and to assist with its transition from county to private jurisdiction (Maui County was the only county-jurisdiction youth shelter in the nation). This was followed by OCY initiating, with its federal funds, the first meeting of youth shelter operators from every county which resulted in today's Hawaii Youth Shelter Network.

Other county-level activities to improve coordination have included large meetings with business, professional and religious leaders to develop awareness of CA/N and the available services and programs.

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Another OCY involvement in the private sector was the Casey Family Program Foundation. OCY served as the state's lead agency, coordinating and assisting with information, on site visitations and conferences on placement needs. This resulted in the Foundation's decision to establish a program in Hawaii with a potential of \$500,000 to provide for placement needs in Hawaii.

Each of these examples required interagency, inter-governmental branch and private sector coordination and participation. Further, these examples should verify the soundness of the 1976 Legislature's decision to create a much-needed OCY to facilitate coordination and to assist in service improvement.

However, even a cursory examination of OCY's statutory duties and the attendant resources allocated to OCY should raise questions about how serious decision-makers are about having these statutory duties performed.

Page 7-8: An issue which is of great importance is the role of interagency advisory committees in promoting and facilitating coordination. Although brief mention is given to the DOH Child Abuse and Neglect Secondary Prevention Advisory Committee (CANSPAC) on pages 7-8, it is only to point out that the purpose of the committee appears ill-conceived and that there may be possible impropriety of having members advise the DOH on the need for services which they themselves offer as private providers.

Interagency bodies can be very effective in facilitating coordination and it would be beneficial to examine the role of existing interagency advisory committees, e.g., CANSPAC, the Oahu CPS Advisory Committee as well as CPS advisory committees established on the other islands, and the Judiciary's Permanency Planning Task Force, their strengths and weaknesses, and to make recommendations accordingly.

Page 14: About compiling empirical data on CA/N case processing--this is a critically needed monitoring activity duty. However, OCY as an agency external to the internal operating processes is not in a feasible position to perform this monitoring function. We suggest it can be best performed by each respective department in CA/N.

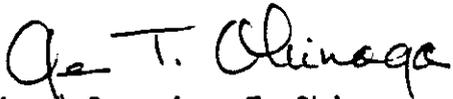
Page 18: The draft report about the lack of "...a fundamental sense of urgency among government personnel about getting help to..." CA/N victims may be true as one would find in almost any field of service. But it is particularly in the field of CA/N that OCY has received many SOS requests which was what initiated many of the examples cited earlier. Because of these governmental personnel's sense of urgency, they soon burn-out or move out of this field of service. Ample resources must be diverted immediately into this field--new monies which are deemed to be needed, re-allocation of existing resources, continuing support and demonstrated high priority regard

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for this field of service by decision-makers, and a systematic evaluation program to determine service effectiveness.

If there are questions, please feel free to contact me at 548-7582 or 548-7583.

Sincerely,


(Mrs.) Genevieve T. Okinaga
Director



STATE OF HAWAII
DEPARTMENT OF SOCIAL SERVICES AND HOUSING

P. O. Box 339
Honolulu, Hawaii 96809

August 26, 1986

MEMORANDUM

TO: Richard F. Kahle, Jr., Acting Director
Legislative Reference Bureau

FROM: Franklin Y. K. Sunn, Director

SUBJECT: HOUSE RESOLUTION 147, H.D. 1

We are submitting our comments and observations on your report regarding House Resolution 147, H.D. 1.

We are aware that time constraints limited the scope of the study called for by House Resolution 147, H.D. 1, and suggest that this be noted in the report since some vital components of the child abuse and neglect (CAN) system are not covered. For example, the role of the military in the CAN system is not covered. Of the total number of CAN reports received, approximately 15% represent military families. In addition, the military in Hawaii has an extensive and complex CAN service delivery system that interfaces with, and impacts upon all other elements of the CAN delivery system.

In pointing out the overlap between the Department of Social Services and Housing (DSSH) and the Department of Health (DOH) on page 5, the report neglects to mention that both departments generally distinguish their functions as prevention (DOH) and treatment after the fact (DSSH). While there will always be some overlap in the provision of service to similar target groups, we are in general agreement that more can be done to eliminate existing duplication and overlap.

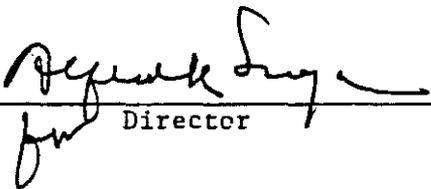
In the discussion of entry into the system on pages 10-12, we suggest that a clear and definitive statement regarding our Department's mandated responsibility to receive all reports of suspected CAN be inserted into the text. As currently constructed, particularly at the top of page 11, the report gives the impression that entry into the child protective services (CPS) system can occur through various entry points. In fact, entry into the CPS system can occur only through our Department or the police.

Regarding the matter of "screening out" mentioned in the first paragraph on page 12, we merely wish to clarify that the statement was intended to note that "screening out" was simply a function of the staffing situation - i.e. whenever there is a severe staffing shortage, "screening out" tends to increase. Likewise,

"screening out" is minimal when there is no staffing shortage. The comment was not intended to identify any personnel as being derelict in their duties.

DSSH has published a CPS Handbook which provides written guidelines for CPS workers to assist them in interpreting and carrying out statutory requirements and rules. We have provided a copy of CPS Handbook to your staff person, Christina Uebelein, and are requesting that Recommendation Number 3 on page 14 be revised to reflect this fact.

Thank you for allowing us the opportunity to comment on your response to House Resolution 147, H.D. 1. Should you have any further questions regarding our comments, please contact Stanley Inkyo at 548-5491.



Director



STATE OF HAWAII
DEPARTMENT OF HEALTH

P. O. BOX 3378
HONOLULU, HAWAII 96801

August 26, 1986

In reply, please refer to:
File:

Mr. Richard F. Kahle, Jr.
Acting Director
Legislative Reference Bureau
State Capitol
Honolulu, Hawaii 96813

Dear Mr. Kahle:

I appreciate the opportunity to comment on the draft report the Legislative Reference Bureau has done in response to H.R. 257, H.D.1. In general, the report is well done and reflects a solid, in-depth knowledge of the area attained in a very short period of time by your researcher Ms. Uebelein. I do, however, have some concerns with respect to some of the specific recommendations made. Specifically:

A. Organizational Structure

Recommendation 1: The executive or the legislature mandate the development of linkages between the state-administered programs on child abuse and neglect and provide stronger leadership in improving policies to assure quality, accessibility, and equity.

Unless the content of such linkages can be clearly defined, more mandate from the legislature or the executive will not be of assistance in developing linkages. I would suggest that, unless the nature of such linkages can be placed in the recommendation, that this recommendation be dropped.

Recommendation 2: The legislature compel the departments of education, health, and social services and housing, and the family court to participate in joint planning, joint budgeting, joint evaluation, joint programming, and joint development of operating policies in the area of child abuse and neglect.

The word "compel", like the word "mandate", is a strong word. Such a legal requirement should not be lightly

Mr. Richard F. Kahle, Jr.
Acting Director
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entered into. While such joint activities might well be beneficial from a coordination standpoint, requiring that they be done without other guidelines could turn such a requirement into a paper exercise. Again, I'd look to other mechanisms before placing a mandate in statute.

Recommendation 3: A common set of data to assess needs, profile populations, and track the use of services be developed and used in the planning process for child abuse and neglect services.

Such a data system would be beneficial. It would also, however, be costly. It is currently not being done at least partially due to the lack of resources available for such activities. Perhaps the recommendation could acknowledge these significant additional costs.

B. Program Administration

Recommendation 3: A uniform system to determine the effectiveness of services, to track the utilization of services, and to identify the needs for services be developed jointly by the departments of education, health, and social services and housing, and the family court, and that this information be available to program administrators planning the purchases of service.

As in my comment relating to Recommendation 3 under "Organizational Structure," such an evaluation system is needed and warranted. However, it will cost additional resources to implement. Again, the need for such resources should be noted in conjunction with this recommendation.

C. Service Delivery

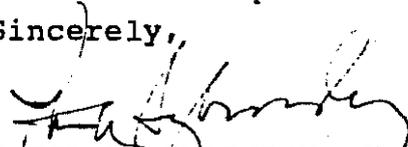
Recommendation 6: The departments of health and social services and housing include more specifialized treatment programs for adolescents in their fiscal year 1987-1988 requests for proposals from the private sector.

As RFPs have already been solicited for FY 1987-88, it is suggested that the fiscal year be changed to 1988-89 in this recommendations.

Mr. Richard F. Kahle, Jr.
Acting Director
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August 26, 1986

Please contact me at extension 7406 if you desire further clarification on these points. Again, thanks for the opportunity to comment.

Sincerely,



PETER A. SYBINSKY, Ph.D.
Administrative Assistant to the
Director

Ronaele Whittington, D.S.W.

P.O. Box 592
Kailua, HI 96734
261-8400

August 24, 1986

Richard F. Kahle, Jr.
Acting Director
Legislative Reference Bureau
State of Hawaii
State Capitol
Honolulu, HI 96813

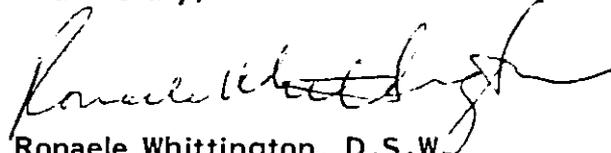
Dear Mr. Kahle,

Thank you for the opportunity to review the preliminary draft called "An Examination of Child Abuse and Neglect Services in Hawaii" by Christina Uebelein, August 1986. Once again, the LRB has held to its high standard of review and analysis. In this case, the matter is of great urgency to the children and families of Hawaii. The report suggests a number of ways in which we can all come together on behalf of the children. The report suggests that with some focus and coordination, the system of serving children and their families could be less complex and chaotic than it appears at present.

I trust that the legislature and administrators will take this report as a guide to ongoing modifications in the system of services. Followup and continuity of effort toward coordination and teamwork will be essential if this report is to have appropriate impact on the system. I am optimistic that we can all work together with this guide in hand.

Congratulations on a thorough response to House Resolution 147, H.D.1.

Yours truly,



Ronaele Whittington, D.S.W.
Clinical social worker
Social Work Associates, Inc.

RW/rrr



STATE OF HAWAII

DEPARTMENT OF EDUCATION
P.O. BOX 2360
HONOLULU, HAWAII 96804

OF INSTRUCTIONAL SERVICES

August 19, 1986

Mr. Richard F. Kahle, Jr.
Acting Director
Legislative Reference Bureau
State Capitol
Honolulu, HI 96813

Dear Mr. Kahle,

Thank you for the opportunity to review the draft report on child abuse and neglect services in Hawaii. I have scribbled my notes on the draft itself. I would like to compliment the writer of this report for saying things directly and succinctly. It reads very well.

I look forward to the final copy to share with other service providers and our counselors in the public schools.

Sincerely,

A handwritten signature in cursive script that reads "Nancy Yuen".

Nancy Yuen
Educational Specialist
Guidance and Counseling